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Evaluating Programs That Address Ideological Issues: Ethical and Practical Considerations for Practitioners and Evaluators

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Evaluating Programs That Address Ideological Issues: Ethical and Practical Considerations for Practitioners and Evaluators

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There are important practical and ethical considerations for organizations in conducting their own, or commissioning external, evaluations and for both practitioners and evaluators, when assessing programs built on strongly held ideological or philosophical approaches. Assessing whether programs "work" has strong political, financial, and/or moral implications, particularly when expending public dollars, and may challenge objectivity about a particular program or approach. Using a case study of the evaluation of a school-based abstinence-until-marriage program, this article discusses the challenges, lessons learned, and ethical responsibilities regarding decisions about evaluation, specifically associated with ideologically driven programs. Organizations should consider various stakeholders and views associated with their program to help identify potential pitfalls in evaluation. Once identified, the program or agency needs to carefully consider its answers to two key questions: Do they want the answer and are they willing to modify the program? Having decided to evaluate, the choice of evaluator is critical to assuring that ethical principles are maintained and potential skepticism or criticism of findings can be addressed appropriately. The relationship between program and evaluator, including agreements about ownership and eventual publication and/or promotion of data, should be addressed at the outset. Programs and organizations should consider, at the outset, their ethical responsibility when findings are not expected or desired. Ultimately, agencies, organizations, and programs have an ethical responsibility to use their data to provide health promotion programs, whether ideologically founded or not, that appropriately and effectively address the problems they seek to solve.

Keywords: *evaluation; ethical issues; ideological programs*

INTRODUCTION

Program evaluations seek to accomplish a variety of things: measure achievement of identified outcomes and potential unintended outcomes, improve a

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program's ability to meet client needs, improve program quality, demonstrate a program's effectiveness and value to funders, determine program deficiencies, and inform the "field" about effective programs. The power of data, however, to determine how programs get funded or are maintained, suggests the need for clear focus on ethics in evaluating programs. Demonstrating program success has implications for continued funding, public support of an organization, and promotion and sale of materials. In addition, success of a particular program sometimes corresponds to support of an ideological or philosophical approach related to the health issue being evaluated. Thus, there are important practical and ethical considerations for organizations in conducting their own, or commissioning external, evaluations and for both practitioners and evaluators when assessing programs built on strongly held ideological or philosophical approaches.

For those who are professional evaluators, there are a range of ethical considerations (American Evaluation Association, 2013), as summarized in Table 1.

These ethical considerations and others (Schwandt, 2007; Shaw, 2003) focus almost exclusively on the evaluator's ethical responsibilities. Although the ethical responsibility of practitioners in conducting health promotion programs (Carter, Cribb, & Allegrante, 2012) and in reporting evaluations (Society for Public Health Education, 2013) is well established, ethical responsibilities regarding evaluation data have traditionally lied with the evaluator. For this reason, we aim to expand the discussion of ethical responsibilities regarding decisions about evaluation, specifically associated with ideologically driven programs, to practitioners, as well as to organizations, funders, and policy makers.

CHOOSING WHETHER AND HOW TO EVALUATE

Evaluation questions are complicated when the nature of the program is rooted in an ideological context, that is, when an agency or community is heavily invested in a particular philosophy or stance. Social issues such as violence and gun control, often cast in the public health arena (Hemenway & Miller, 2013), have strong ideological and emotional components. Public health interventions, some with historically strong supporting evidence, such as condom availability (Guttmacher et al., 1997) and needle exchange (Vlahov et al., 2001), or refuting evidence, such as Drug Abuse Resistance Education (Clayton, Cattarello, & Johnstone, 1996), are often discussed within an ideological or philosophical context. Furthermore, as interventions such as limits on sales of sugar-sweetened beverages (Frieden, Dietz, & Collins, 2010) become more popular, concerns about interference with personal liberties are likely to make evaluation of their impact highly charged.

In short, assessing whether programs "work" has strong political, financial, and/or moral implications, particularly when expending public dollars, and may challenge objectivity about a particular program or approach. Accordingly, when a program takes a strong ideological stance or is rooted in a controversial approach, the need to "prove" that it works is likely to influence whether to evaluate, as well as the approach, questions asked, and evaluator selected. In the context of strong ideology, it is especially difficult to answer questions about program success because of the following reasons:

1. The threshold of "success" or effect size varies, dependent on what outcomes are being measured and how much change is thought possible.
2. Determining whether a particular outcome is a risk or benefit varies with differing beliefs and philosophies.
3. Evaluators, themselves, may be aligned with particular types of programs, associated with inherent biases.
4. Some mistakenly assume that assessment of a particular program's impact is interchangeable with assessment of an entire ideological approach.

Program developers, sponsoring agencies, or organizations seeking to determine program value must recognize the implications of deciding whether, how, and who should perform evaluation. It is proposed here that evaluations associated with strong ideologies should be guided by two important questions. An evaluation that represents a program fairly, accurately, and without bias may not be possible if the answer to either question is no.

1. Do you want to understand the effectiveness of your program and are you willing to accept the results of rigorous, unbiased evaluation?
2. If data do not demonstrate effectiveness, are you willing to revise, rethink, or change course, even if a new direction is inconsistent with a previous ideological perspective?

The timing and purpose of evaluation is likely to influence whether an organization chooses to evaluate itself (i.e., "internal") or to engage in external evaluation (Table 2). Impartial evaluation is often assumed

TABLE 1
Ethical and Practical Considerations for Health Educators and Evaluators

Society for Public Health Education, Code of Ethics[a]

Article I: Section 3: Health Educators accurately communicate the potential benefits and consequences of the services and programs with which they are associated.

Article IV: Section 3: Health Educators are committed to rigorous evaluation of both program effectiveness and the methods used to achieve results. *Section 5*: Health Educators communicate the potential outcomes of proposed services, strategies, and pending decisions to all individuals who will be affected.

Article V: Section 1: Health Educators support principles and practices of research and evaluation that do no harm to individuals, groups, society, or the environment. *Section 6*: Health Educators who serve as research or evaluation consultants discuss their results only with those to whom they are providing service, unless maintaining such confidentiality would jeopardize the health or safety of others. *Section 7*: Health Educators report the results of their research and evaluation objectively, accurately, and in a timely fashion.

American Evaluation Association, Guiding Principles for Evaluators[b]

A. Systematic Inquiry: 3. Evaluators should communicate their methods and approaches accurately and in sufficient detail to allow others to understand, interpret, and critique their work. They should make clear the limitations of an evaluation and its results. Evaluators should discuss in a contextually appropriate way those values, assumptions, theories, methods, results, and analyses significantly affecting the interpretation of the evaluative findings.

C. Integrity/Honesty: 1. Evaluators should negotiate honestly with clients and relevant stakeholders concerning the costs, tasks to be undertaken, limitations of methodology, scope of results likely to be obtained, and uses of data resulting from a specific evaluation. 2. Before accepting an evaluation assignment, evaluators should disclose any roles or relationships they have that might pose a conflict of interest (or appearance of a conflict) with their role as an evaluator. 4. Evaluators should be explicit about their own, their clients', and other stakeholders' interests and values concerning the conduct and outcomes of an evaluation. 5. Evaluators should not misrepresent their procedures, data, or findings. Within reasonable limits, they should attempt to prevent or correct misuse of their work by others. 6. If evaluators determine that certain procedures or activities are likely to produce misleading evaluative information or conclusions, they have the responsibility to communicate their concerns and the reasons for them. If discussions with the client do not resolve these concerns, the evaluator should decline to conduct the evaluation. If declining the assignment is unfeasible or inappropriate, the evaluator should consult colleagues or relevant stakeholders about other proper ways to proceed. 7. Evaluators should disclose all sources of financial support for an evaluation, and the source of the request for the evaluation.

D. Respect for People: Evaluators respect the security, dignity, and self-worth of respondents, program participants, clients, and other evaluation stakeholders. 3. Because justified negative or critical conclusions from an evaluation must be explicitly stated, evaluations sometimes produce results that harm client or stakeholder interests. Under this circumstance, evaluators should seek to maximize the benefits and reduce any unnecessary harms that might occur, provided this will not compromise the integrity of the evaluation findings. Evaluators should carefully judge when the benefits from doing the evaluation or in performing certain evaluation procedures should be foregone because of the risks or harms. To the extent possible, these issues should be anticipated during the negotiation of the evaluation. 4. Knowing that evaluations may negatively affect the interests of some stakeholders, evaluators should conduct the evaluation and communicate its results in a way that clearly respects the stakeholders' dignity and self-worth.

Responsibilities for General and Public Welfare: Evaluators articulate and take into account the diversity of general and public interests and values that may be related to the evaluation. 4. Evaluators should maintain a balance between client needs and other needs. Evaluators necessarily have a special relationship with the client who funds or requests the evaluation. By virtue of that relationship, evaluators must strive to meet legitimate client needs whenever it is feasible and appropriate to do so. However, that relationship can also place evaluators in difficult dilemmas when client interests conflict with other interests, or when client interests conflict with the obligation of evaluators for systematic inquiry, competence, integrity, and respect for people. 5. Evaluators have obligations that encompass the public interest and good. These obligations are especially important when evaluators are supported by publicly generated funds; but clear threats to the public good should never be ignored in any evaluation.

a. These items are excerpted from the full Society for Public Health Education Code of Ethics (www.sophe.org/Ethics.cfm).
b. This material is excerpted from the American Evaluation Association Guiding Principles for Evaluators (http://www.eval.org/p/cm/ld/fid=51).

TABLE 2
Planning Evaluations in Ideological Contexts

Choosing to evaluate		
What do you want to know?		
Who is being reached? Do they like it?	→	Internal evaluation is probably sufficient
Does the program meet its stated goals?	→	External evaluation is probably necessary
If it is not working, what will you do about it?		
Continue your approach anyway	→	Internal evaluation is probably sufficient
Seek to modify methods, approach, dosage, timing, other factors that may be associated with outcomes	→	External evaluation is probably necessary
Who will you seek to do the evaluating?		
Someone who already agrees with my approach	→	Internal evaluation is probably sufficient
Someone who already is on the opposite “side”	→	External evaluation is probably necessary, potentially biased against your program
Someone committed to rigor, objectivity, regardless of outcome	→	External evaluation is necessary (sometimes assigned or identified by a funder)
Components of the evaluation agreement		
What do you need to consider in planning the evaluation?		
What research questions will be asked?	→	Primarily driven by program, with involvement of evaluator
What outcomes will be measured?	→	Primarily driven by program, but operationally determined by the evaluator
How will the data be collected and analyzed?	→	Primarily driven by evaluator with understanding, approval, cooperation of program
Who and how will results be interpreted?		
Completely internal	→	Agency collects or receives the data and draws its own conclusion
Completely external by the evaluator	→	Evaluator collects/analyzes data, and “reports” to the agency
Collaborative process	→	Reviewing and discussing data together so evaluator understands the program and administrators/staff are committed to listening and understanding research findings[a]
Who and how will results be presented?		
The evaluator	→	To agency, funders, and other stakeholders, as determined by agreement with agency
The agency/organization	→	To its funders, clients, and other stakeholders
Collaborative publication or reporting	→	Both evaluators and agencies should be sufficiently prepared to present results accurately, assuming careful, rigorous study of a well-designed program was conducted[b]
What happens next?		
The evaluator	→	Will provide a report to the funder, “hand over” data, and/or publish findings
The agency/organization	→	Will use the findings to continue its work and/or revise/retool

a. This process should begin long before the analysis/interpretation stage.
b. Although outcomes are unknown at the outset, contingencies should be discussed to assure understanding about who “owns” the data, and the circumstances under which publication/publicity will be undertaken.

with "external" or "independent" evaluation. Even external evaluation, however, can be associated with bias, for example, a program with strong ideological ties selects an evaluator because of previous work consistent with the organization's ideology. This perceived bias may later influence the way others (particularly those with differing philosophical views) accept or reject eventual findings. This type of external evaluation differs from those in which a third party (a funder or agency sponsoring the program) commissions an evaluation, often engaging multiple projects in cross-site evaluation, for example, a federally funded evaluation of several abstinence-until-marriage programs (Trenholm et al., 2007). A variety of ethical challenges (Morris, 1999) face evaluators and practitioners working in program areas with ideological foundations. Funders of such programs should consider these issues, as well as policy makers, who may be allocating resources on the basis of these studies.

CASE STUDY: EVALUATION IN THE IDEOLOGICAL CONTEXT OF AN ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAM

A case study is used here to illustrate some of the challenges that have been identified and how they were addressed, in one particular ideological context, a school-based abstinence-until-marriage program. The Community-Based Abstinence Education grants, funded by the Federal government between 2000 and 2010, although encouraging program evaluation, did not specify or require a specific type of evaluation. One organization sought to demonstrate the effectiveness of their popular program in a randomized study that could eventually be publishable in peer-reviewed literature. Believing that the credibility of the evaluation would be greater if their external evaluator was not previously affiliated with abstinence-only-until-marriage programs, they hired the lead author of this article, who had engaged in evaluation of both comprehensive sex education programs and abstinence-focused programs.

Together, the organization and evaluator were committed to a rigorous and potentially publishable study that was honest and forthcoming with the findings. The study took place in two communities that sought an abstinence education curriculum. The evaluation was an experimental study in which a total of six high schools (from two different school districts) were randomly assigned: Ninth graders in four schools received the curriculum being tested; 9th graders in the two control schools received their districts' existing abstinence-focused health textbook lessons. Written survey data were collected at three points: beginning and end of 9th grade and beginning of 10th grade. The organization was committed to the randomization and study protocols throughout the process, and worked closely with the evaluator to meet typical school-based research challenges.

The evaluation demonstrated short-term (by the end of 9th grade) positive impact on knowledge, attitudes, and intentions to remain abstinent, and short-term self-reported delay of sexual onset. There was no short-term impact on intentions or behavior among students who were already sexually active at pretest. Furthermore, the differences between intervention and control groups were no longer significant by the early 10th-grade follow-up. Findings were discussed and explored with agency staff, and a paper was published approximately 1 year later. It is important to note that per agreement, the data belonged to the agency. That is, if the agency had not sought to publish it, there was no obligation, nor right, of the evaluator to publish the findings. The organization had a key question: Does this program's abstinence education curriculum improve knowledge, encourage proabstinence attitudes, and reduce or delay sexual activity before marriage? Overlaying this question, however, was a larger overarching question, which the organization, and others with whom it collaborated, wanted to know: Does abstinence education work?

Differentiating between these two questions created some of the ethical and practical challenges that ensued. Despite extensive discussions and explanation of findings, the agency, as well as a national advocacy organization, distributed press releases indicating that the program had conducted a gold standard evaluation proving that abstinence education works "to reduce teen sex." The evaluator immediately contacted the agency, encouraged them to correct the headline and conclusions, and worked to clarify the nuances of the findings. For example, the differences between delayed onset and reduced sex were illuminated, as well as the caveats necessitated by the short-term nature of the findings and the differences between outcomes of a specific program and effectiveness of an entire approach. The agency released a corrected press release, and included both the press release and the link to the full-text journal article on their website. The national organization, however, did not change its press release. Furthermore, what appears to be a study citation on their website directs the reader to the agency's curriculum website, not to the published article.

This case was an atypical partnership between an evaluator who had published on one "side" of the sex education debate (Guttmacher et al., 1997) and a program on the other. The evaluator entered the partnership with two questions she believed were critical (i.e., Do you really want the answer? And what will you do if the answer is not what you hope for?). In accordance with ethical criteria set out by the American Evaluation Association and others, she accurately represented her previous work and remained vigilant throughout the process to correct for potential biases (of either the evaluator or the program). The agency remained committed to conducting the evaluation in a way that would provide credible answers. The evaluator worked closely with the agency to explain and interpret findings. As agreed, a paper was submitted for publication, using objective language, clear of ideology, and enabling the reader to draw conclusions about both the study's outcomes and appropriateness of the program for particular communities.

The commitment of the agency to reduce sexual activity outside of marriage led to a genuine interest in determining whether its program could achieve that outcome. When it demonstrated limited and short-term success, the data were represented fairly, and discussions took place about how to expand or revise the program to improve its ability to meet its goals. That discussion took place, however, within its strong ideological stance and continued interest in marketing programs in communities that shared that same ideological goal. This led to inconsistencies in the interpretation of those findings in other publications, websites, and venues. Furthermore, although the ethical considerations that guided this evaluation were understood by the agency, they were not agreed to by a larger advocacy organization, which had a strong ideological stake in the study's findings.

LESSONS LEARNED

The case study presented suggests a variety of ethical considerations and lessons for programs and evaluators together, particularly when a strong ideological or philosophical approach is being tested. Table 2 provides a step-by-step description of some of these considerations.

First, programs should consider the various stakeholders and views associated with their program to help identify potential pitfalls in evaluation. When a program has a strong ideological stance, it may be especially important to identify and clarify that position before embarking on evaluation.

Second, once identified, the program or agency needs to carefully consider its answers to the two key questions presented earlier. Such answers will help determine whether and what type of evaluation is appropriate, for example, internal or external, process and/or outcome or, perhaps, only anecdotal or testimonial data.

Third, having decided to evaluate, the choice of evaluator may be critical to assuring that ethical principles are maintained and that potential skepticism or criticism of findings can be addressed appropriately. Regardless of the agencies' stance, evaluators who work with only one type of program, one "side" of an issue, or certain organizations may have inherent biases that challenge the evaluation process and outcomes. Depending on the program's funding source, evaluators may be assigned or recommended by the funding agency. Under such circumstances, funders can provide guidelines and suggestions that assure objectivity in both evaluator selection and research methods.

Fourth, when selecting an evaluator, the relationship between program and evaluator, including agreements about ownership and eventual publication and/or promotion of data, should be addressed. Within such discussion, the organization and evaluator together should discuss their respective responsibilities or plans if data are inconsistent with a program's expectations. This includes steps that will be taken together to understand and explore the data, to determine when and where it is appropriate to share the data, and to decide who will have responsibility for creating and monitoring accuracy of reports and public materials. These concerns are addressed in ethical responsibilities regarding reporting of data, as noted in Table 2 (Society for Public Health Education Article V, Sections 6 and 7; and American Evaluation Association's "Responsibilities for General and Public Welfare"). Despite upfront discussions about use and reporting of data, however, an evaluator typically does not have control over what occurs after the formal partnership ends, or over other agencies or entities.

Programs and organizations should consider their responsibility, and the ethics of various approaches, to the most perplexing challenge, that is, appropriate responses when findings are not expected or desired. Programs and organizations are likely to continue to be guided by their ideology or philosophical perspectives; thus, there are several ways to approach this challenge. Some will choose to revise or improve the program, based on the findings. Others may overlook the findings of the study and continue to do what they do, but they must consider the ethical implications of misrepresenting findings or acting "as if" they had not collected data. Unfortunately, this sometimes takes the form of using misunderstood terminology or making outcomes sound more conclusive than indicated by the data. A third approach, in the face of strong ideology, may be to state the case accurately, while stating clearly and maintaining that an approach is based on an ideological, philosophical, religious, or moral position.[1]

Finally, these issues need to be more broadly considered, both by funders who are supporting programs and their evaluations and by policy makers (e.g., school boards, government agencies, or local lawmakers) in understanding and using evaluation data to make decisions about, or allocate resources for, health promotion. In addition, professional ethical guidelines, such as those presented in Table 2, might consider expanding such guidelines to explore these ethical issues more broadly, such that maintaining ethical principles is not solely the role of the individual evaluator or program staff.

CONCLUSION

The case study and considerations presented here suggest that practitioners and evaluators have a responsibility together to assure ethical relationships, open communication, and clear agreements about the purpose and use of the data. Evaluators specifically have a responsibility to report honestly, with full disclosure, while recognizing that except for evaluations commissioned independently by a funder or an oversight agency, data typically belong to the organization. There is a difference between presenting negative findings to staff and administration for program improvement, however, and publicizing negative findings. Evaluators generally have a responsibility to do the former. Agreements about the latter depend on an understanding that should be made at the outset of the partnership, keeping in mind that evaluations have relevance for programs or agencies, as well as to funders, and/or the field. The interests of these various stakeholders are likely to differ, particularly around programs with strong ideological foundations. Agencies, organizations, and programs have an ethical responsibility to use their data to provide health promotion programs, whether ideologically founded or not, that appropriately and effectively address the problems they seek to solve.

NOTE

1. One such example occurred when a New York City Board of Education member reacted to the findings of a widely publicized study ("The Impact of Condoms in schools," 1997) of the city's condom availability program. Reflecting on the positive findings with respect to condom use among the students at highest risk for HIV, while not increasing sexual activity among others, the board member stated publicly that although he could no longer oppose the program on empirical grounds, he would continue to oppose it on moral grounds.

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